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<b>B1</b> (Official Form 1)(04/13)				Jannone		90 - 0.					
	United S Nor	States E thern Di							Vol	untary	Petition
Name of Debtor (if individual, enter Last, First, Middle):  Cox, Alexis M.					Name	of Joint De	ebtor (Spouse	) (Last, First	, Middle):		
All Other Names used by the (include married, maiden, and		3 years					used by the J maiden, and			3 years	
Last four digits of Soc. Sec. or (if more than one, state all)  xxx-xx-7626	· Individual-Taxpa	yer I.D. (ITI	IN)/Comp	olete EIN	Last fo	our digits o than one, state	f Soc. Sec. or	Individual-7	Γaxpayer I.	D. (ITIN) No	o./Complete EIN
Street Address of Debtor (No. 1206 8th Avenue Belvidere, IL	and Street, City, a	and State):		ZID Code	Street	Address of	Joint Debtor	(No. and Str	eet, City, a	nd State):	ZIP Code
			6	ZIP Code 51008	_						ZIP Code
County of Residence or of the <b>Boone</b>	Principal Place of	Business:		1000	Count	y of Reside	ence or of the	Principal Pla	ace of Busi	ness:	
Mailing Address of Debtor (if	different from stre	et address):			Mailir	o Address	of Joint Debte	or (if differe	nt from stre	et address):	
Walling Address of Debtor (II	different from site	et address).			Iviaiiii	ig Address	or John Debu	or (ir differen	nt from suc	ct address).	
			_	ZIP Code							ZIP Code
Location of Principal Assets o	f Rusiness Debtor										
(if different from street addres											
Type of Debt (Form of Organization) (C		]		f Business one box)			-	of Bankrup Petition is Fi	•		ch
Individual (includes Joint I		☐ Health				Chapt		cution is ri	ieu (Check	one box)	
See Exhibit D on page 2 of thi	s form.	☐ Single	Asset Rea	al Estate as	defined	☐ Chapt				etition for R	
☐ Corporation (includes LLC☐ Partnership	and LLP)	□ Railroa	J.S.C. § 10 nd	01 (51B)		Chapter 11 of a Foreign Main Proceeding					
Other (If debtor is not one of		☐ Stockb	roker			☐ Chapt☐				etition for R Nonmain Pr	
check this box and state type of	of entity below.)	☐ Commo		ker		I 🗖 Спарі	er 15	01	u i oreign	TOMMUM 11	occeaning
Chapter 15 Deb	store	Other	ig Dank					Nature	of Debts		
Country of debtor's center of main				npt Entity		<b>-</b> 5	,	(Check	one box)		,
Each country in which a foreign p by, regarding, or against debtor is	proceeding	Debtor i	is a tax-exe itle 26 of the	if applicable empt organiz he United Sta Revenue Co	ation ates	Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
Filing Fo	ee (Check one box	)		I	one box:	•	-	ter 11 Debt			
Full Filing Fee attached							debtor as defin ness debtor as d				
Filing Fee to be paid in install attach signed application for the				Check i	if:				-		
debtor is unable to pay fee exc											lers or affiliates) se years thereafter).
Form 3A.		- · · · · · ·			all applicable	boxes:					
Filing Fee waiver requested (a attach signed application for the				, I 🗀 "			this petition. vere solicited pr	repetition from	one or more	e classes of cr	editors.
							S.C. § 1126(b).				,
Statistical/Administrative In  ☐ Debtor estimates that fund		for distribut	tion to un	consend or	ditore			THIS	SPACE IS I	FOR COURT	USE ONLY
■ Debtor estimates that, after	any exempt prop	erty is exclu	ded and a	dministrati		es paid,					
there will be no funds avail Estimated Number of Creditor		on to unsect	irea creai	tors.							
1- 50- 100- 49 99 199	□ 200-		5,001- 0,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000				
Estimated Assets			,					1			
\$0 to \$50,001 to \$100,00 \$50,000 \$500,000	001 to \$500,001 000 to \$1	to \$10 to	10,000,001 5 \$50	\$50,000,001 to \$100	\$100,000,001 to \$500	\$500,000,001 to \$1 billion					
Estimated Liabilities			nillion	million	million						
\$0 to \$50,001 to \$100,0 \$50,000 \$500,00	001 to \$500,001 000 to \$1	to \$10 to	10,000,001 5 \$50 nillion	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion					

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Page 2 Name of Debtor(s): **Voluntary Petition** Cox, Alexis M. (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: - None -Location Date Filed: Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I (To be completed if debtor is required to file periodic reports (e.g., have informed the petitioner that [he or she] may proceed under chapter 7, 11, forms 10K and 10Q) with the Securities and Exchange Commission 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition.  $\mathbf{X}$  /s/ Daniel A. Springer April 29, 2015 Signature of Attorney for Debtor(s) (Date) Daniel A. Springer Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. П Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

### B1 (Official Form 1)(04/13)

## **Voluntary Petition**

(This page must be completed and filed in every case)

## Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

### X /s/ Alexis M. Cox

Signature of Debtor Alexis M. Cox

 $\mathbf{X}$  .

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

April 29, 2015

Date

### Signature of Attorney\*

### X /s/ Daniel A. Springer

Signature of Attorney for Debtor(s)

### Daniel A. Springer 6314059

Printed Name of Attorney for Debtor(s)

### Springer Law Firm

Firm Name

2222 E State St Suite 107 Rockford, IL 61104

Address

### Email: dspringerlaw@gmail.com

#### 815.312.4725

Telephone Number

### April 29, 2015

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Name of Debtor(s):

Cox, Alexis M.

### Signatures

### Signature of a Foreign Representative

Page 3

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

### **Signature of Non-Attorney Bankruptcy Petition Preparer**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

 $\mathbf{v}$ 

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B1 (Official For	rm 1)(04/13)	<u></u>	Page 2
Voluntar	y Petition	Name of Debtor(s):  Cox, Alexis M.	
(This page mi	ust be completed and filed in every case)	OOA, AICAIS W.	
10	All Prior Bankruptcy Cases Filed Within Last	t 8 Years (If more than two.	attach additional sheet)
Location Where Filed:		Case Number:	Date Filed:
Location Where Filed:		Case Number:	Date Filed:
Pe	ending Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If r	nore than one, attach additional sheet)
Name of Debi		Case Number:	Date Filed:
District:		Relationship:	Judge:
	Exhibit A	// / / / / / / / / / / / / / / / / / /	Exhibit B
forms 10K a pursuant to s and is reque	pleted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission Section 13 or 15(d) of the Securities Exchange Act of 1934 sting relief under chapter 11.)  A is attached and made a part of this petition.	I, the attorney for the petition have informed the petitioner 12, or 13 of title 11, United 5	April 29, 2015  Debtor(s) (Date)
	Exh or own or have possession of any property that poses or is alleged to Exhibit C is attached and made a part of this petition.	nibit C pose a threat of imminent and id	ientifiable harm to public health or safety?
Exhibit If this is a joi	Detected by every individual debtor. If a joint petition is filed, ear D completed and signed by the debtor is attached and made a int petition: D also completed and signed by the joint debtor is attached a	a part of this petition.	,
	Information Regardin	_	
=	(Check any ap Debtor has been domiciled or has had a residence, principal days immediately preceding the date of this petition or for	al place of business, or princi	pal assets in this District for 180
	There is a bankruptcy case concerning debtor's affiliate, ge		
	Debtor is a debtor in a foreign proceeding and has its prince this District, or has no principal place of business or assets proceeding [in a federal or state court] in this District, or the sought in this District.	cipal place of business or pring in the United States but is a	cipal assets in the United States in defendant in an action or
	Certification by a Debtor Who Reside (Check all appl	s as a Tenant of Residential licable boxes)	Property
	Landlord has a judgment against the debtor for possession	of debtor's residence. (If box	checked, complete the following.)
	(Name of landlord that obtained judgment)	_	
	(Address of landlord)	<del></del>	
□	Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment for	ere are circumstances under voor possession, after the judgm	which the debtor would be permitted to cure nent for possession was entered, and
	Debtor has included with this petition the deposit with the after the filing of the petition.	court of any rent that would b	become due during the 30-day period
	Debtor certifies that he/she has served the Landlord with th	is certification. (11 U.S.C. §	362(1)).

#### B1 (Official Form 1)(04/13) Page 3 Name of Debtor(s): Voluntary Petition Cox, Alexis M. (This page must be completed and filed in every case) Signatures Signature(s) of Debtor(s) (Individual/Joint) Signature of a Foreign Representative I declare under penalty of perjury that the information provided in this I declare under penalty of perjury that the information provided in this petition petition is true and correct. is true and correct, that I am the foreign representative of a debtor in a foreign If petitioner is an individual whose debts are primarily consumer debts and proceeding, and that I am authorized to file this petition. has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief ☐ I request relief in accordance with chapter 15 of title 11. United States Code. available under each such chapter, and choose to proceed under chapter 7. If no attorney represents me and no bankruptcy petition preparer signs the Certified copies of the documents required by 11 U.S.C. §1515 are attached. petition] I have obtained and read the notice required by 11 U.S.C. §342(b). Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached. I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. Signature of Foreign Representative Signature of Debtor Alexis M. Cox Printed Name of Foreign Representative Signature of Joint Debtor Telephone Number (If not represented by attorney) Signature of Non-Attorney Bankruptcy Petition Preparer April 29, 2015 I declare under penalty of perjuty that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for Date compensation and have provided the debtor with a copy of this document Signature of Attorney\* and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice Signature of Attorney for Debtor(s) of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Daniel A. Springer 6314059 Official Form 19 is attached. Printed Name of Attorney for Debtor(s) Springer Law Firm Printed Name and title, if any, of Bankruptcy Petition Preparer Firm Name 2222 E State St Suite 107 Social-Security number (If the bankrutpcy petition preparer is not Rockford, IL 61104 an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition Address preparer.)(Required by 11 U.S.C. § 110.) Email: dspringerlaw@gmail.com 815.312.4725 Telephone Number April 29, 2015 Address \*In a case in which $\S$ 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect. Date Signature of Debtor (Corporation/Partnership) Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above. I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition Names and Social-Security numbers of all other individuals who prepared or on behalf of the debtor. assisted in preparing this document unless the bankruptcy petition preparer is The debtor requests relief in accordance with the chapter of title 11, United not an individual: States Code, specified in this petition. Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

> A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as mental deficiency so as to be incapable of realizing and ma financial responsibilities.);	
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as punable, after reasonable effort, to participate in a credit cou	
through the Internet.);  □ Active military duty in a military combat zone.	
☐ 5. The United States trustee or bankruptcy administrator requirement of 11 U.S.C. § 109(h) does not apply in this district.	has determined that the credit counseling
I certify under penalty of perjury that the information p	provided above is true and correct.
Signature of Debtor: Alexis M. Cox	A - 1
Date: April 29, 2015	

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B6 Declaration (Official Form 6 - Declaration). (12/07)

## United States Bankruptcy Court Northern District of Illinois

In re	Alexis M. Cox	Debtor(s)	Case No. Chapter	7
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## DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

	I declare under penalty of perjury that I have resheets, and that they are true and correct to the best of m	ad the foregoing summary and schedules, consisting of y knowledge, information, and belief.
Date	April 29, 2015 Signature	Alexis M. Cox Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.

18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

25. Pension Funds.

None I

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\*\*\*\*

## DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date April 29, 2015

Signature

Alexis M. Cox

Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B8 (Form 8) (12/08)

## United States Bankruptcy Court Northern District of Illinois

		Northern District of III	inois	
În re	Alexis M. Cox	_	Case No.	
		Debtor(s)	Chapter	7
	CHAPTER	7 INDIVIDUAŁ DEBTOR'S STAT	TEMENT OF INTEN	TTION
PART	A - Debts secured by prope	rty of the estate. (Part A must be full ach additional pages if necessary.)		
Proper	ty No. 1			
Credit	tor's Name: E-	Describe I	Property Securing Debi	<u> </u>
	ty will be (check one): Surrendered	□ Retained		
	ning the property, I intend to (or Redeem the property Reaffirm the debt Other. Explain	check at least one): (for example, avoid lien using	g 11 U.S.C. § 522(f)).	
	ty is (check one): Claimed as Exempt	□ Not clai	med as exempt	
Attach a	additional pages if necessary.)	o unexpired leases. (All three columns of	Part B must be complete	ed for each unexpired lease.
	ty No. 1 's Name:	Describe Leased Property:	Lease will be U.S.C. § 365	Assumed pursuant to 11 (p)(2):
ersons	re under penalty of perjury that property subject to an unex April 29, 2015	spired lease.  Signapare  Alexis M. Co	4	estate securing a debt and/or

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## United States Bankruptcy Court Northern District of Illinois

	Not their District of th	IIIOIS		
In	re Alexis M. Cox	Case No		
	Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENSATION OF AT	TORNEY FOR D	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am to paid to me within one year before the filing of the petition in bankruptcy, or agree behalf of the debtor(s) in contemplation of or in connection with the bankruptcy of	ed to be paid to me, for se case is as follows:	named debtor and that com rvices rendered or to be ren	npensation ndered on
	For legal services, I have agreed to accept	\$	450.00	
	Prior to the filing of this statement I have received	\$	450.00	
	Balance Due		0.00	
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed compensation with any other p	person unless they are men	nbers and associates of my	law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or per copy of the agreement, together with a list of the names of the people sharing	rsons who are not member g in the compensation is at	s or associates of my law fi tached.	irm. A
5.	In return for the above-disclosed fee, I have agreed to render legal service for all	aspects of the bankruptcy	case, including;	
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor</li> <li>b. Preparation and filing of any petition, schedules, statement of affairs and plan</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation hear</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reduce to market value reaffirmation agreements and applications as needed; prepared to the provision of the secured creditors on household goods.</li> </ul>	which may be required; ring, and any adjourned he e; exemption planning	earings thereof;	g of
6.	By agreement with the debtor(s), the above-disclosed fee does not include the foll Representation of the debtors in any dischargeability actions any other adversary proceeding.	lowing service: s, judicial lien avoidan	ces, relief from stay act	tions or
	CERTIFICATION			
this	I certify that the foregoing is a complete statement of any agreement or arrangement shankruptcy proceeding.	ent for payment to me for	representation of the debtor	r(s) in
Dat	ated: April 29, 2015			_
	Daniel A. Sp			
	Springer La 2222 E State			
	Suite 107			
	Rockford, IL			
	815.312.472	5 w@gmail.com		
	uspringeria	w@gman.com		

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B 201B (Form 201B) (12/09)

# **United States Bankruptcy Court**

	Northern District of Illinois							
In re	Alexis M. Cox		Case No.					
		Debtor(s)	Chapter	7				
	CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE							
		Certification of Debtor						
Code.	I (We), the debtor(s), affirm that I (we) have	ve received and read the attached notic	e, as required	by § 342(b) of the Bankruptcy				
Alexis	M. Cox	_ *	/ (	April 29, 2015				
Printe	1 Name(s) of Debtor(s)	Signature of Debit	<u>ந்</u>	/ Date				
Case N	No. (if known)	X Signature of Joint	Debtor (if any	Date				

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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## United States Bankruptcy Court Northern District of Illinois

		1701 the an District of Hillos		
In re	Alexis M. Cox		Case No.	
		Debtor(s)	Chapter	7
	VEF	RIFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors:	28
	The above-named Debtor(s) leads (our) knowledge.	nereby verifies that the list of credi	tors is true and	correct to the best of my
Date:	April 29, 2015	Alexis M. Cox Signature of Debtor	/	

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Fill in inis informat Debtor 1	ion to identify your ca Alexis M. Cox	ase:				
	First Name	Mid	dle Name	L	ast Name	
Debtor 2 Spouse if, filing)	First Name	Mid	dłe Name	i	ast Name	
	kruptcy Court for the			- RICT OF ILLIN		
Antica Otales Dani	within the	NORTH	INIA DISTI	NOT OF IELIN	010	
Case number if known)			***			☐ Check if this an
, 	——————————————————————————————————————			···	7 %	amended filing
Official Form	B 3A					
		is to Pay	the Fi	lina Fee i	n Installments	12/1
-						
e as complete ar formation.	id accurate as poss	sible. If two n	narried pe	ople are filing	together, both are equally respons	sible for supplying correct
Part 1: Speci	fy Your Proposed I	Payment Tim	etable			
		•		05		
	er of the Bankrupto g to file under?	y Code are		Chapter 7 Chapter 11		
				Chapter 12		
				Chapter 13		
You may app	oly to pay the filing ents. Fill in the amo	fee in up to	You p	ropose to pay		
propose to p	ay and the dates yo	ou plan to				
	sure all dates are dd the payments ye					
to pay.	uo tne payments y	ou propose	÷	83.75	☐ With the filing of the petition	E IOO IA E
			\$	63.73	On or before this date	5/29/15 MM / DD/ YYYY
	pose to pay the entir					
	days after you file the se. If the court appro		\$ <u> </u>	83.75	On or before this date	6/28/15 MM / DD/ YYYY
application, th	e court will set your		\$	83.75	On or before this date	7/28/15
payment time	table.		. ¢	00.75	On or before this data	MM / DD/ YYYY
			+ \$	83.75	On or before this date	8/27/15 MM / DD/ YYYY
						17ms 1 207 ) [ ] [
		_	\$	335.00		
		Total	<u> </u>		four total must equal the entire fee for	r the chapter you checked in line
art 2: Sign I	Below					
/ signing here, ye	ou state that you ar	e unable to :	oav the ful	l filing fee at c	once, that you want to pay the fee is	n installments, and that you
derstand that:	•					Thomas did you
• You m	rust pay your entire f	iling fee befor	e you mak	e any more pa	yments or transfer any more property	to an attorney, bankruptcy petitio
You m	rer, or anyone else fol lust pay the entire fe	or services in e no later thai	connection 120 days	i with your bani after you first i	kruptcy case. file for bankruptcy, unless the court la	ter extends your deadline. Your
debts	will not be discharge	d until your ei	ntire fee is	paid.	•	•
may b	do not make any pay e affected.	ment when it	is due, you	ur bankruptcy o	case may be dismissed, and your righ	ts in other bankruptcy proceeding
< <b>Y</b> //			)		\	
110					×	
Alexis M. Co. Signature of De		·	Signature o	of Debtor 2	Daniel A. Spring Your attorney's na	<b>ger</b> me and signature, if you used on
<u></u>		· ·		<b></b>	Tour Equition 5 Ha	and signature, a you used till
Date April	29, 2015		Date		Date April 29,	2045

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tor 1 Alexis M. Cox		Case numb	er (if known)			
		Column A Debtor 1	Colonia de la co	Column B Debtor 2 o non-filing	raksky o	
Unemployment compensation		\$	0.00_	\$		
Do not enter the amount if you contend that the amount re the Social Security Act. Instead, list it here:	eceived was a benefit und	er				
For you \$	0.00					
For your spouse \$						
Pension or retirement income. Do not include any amo benefit under the Social Security Act.	unt received that was a	\$	0.00	\$		
D. Income from all other sources not listed above. Speci Do not include any benefits received under the Social Se received as a victim of a war crime, a crime against huma domestic terrorism. If necessary, list other sources on a se total on line 10c.	curity Act or payments anity, or international or					
10a		\$	0.00	\$	<u></u>	
10b.		\$	0.00	\$		
10c. Total amounts from separate pages, if any.		+ \$	0.00	\$		
Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total.	s 2 through 10 for I for Column B.	1,852.66	* \$ _		S Total incom	1,852.66
2. Calculate your current monthly income for the year.			·····	. <u> </u>	<u>,</u>	
12a. Copy your total current monthly income from line 11		Co	opy line 11	here=> 12	a. \$	1,852.66
Multiply by 12 (the number of months in a year)						12
12b. The result is your annual income for this part of the	form			12	b. \$	22,231.92
3. Calculate the median family income that applies to y	ou. Follow these steps:					
Fill in the state in which you live.	IL .					
Fill in the number of people in your household.	1					
Fill in the median family income for your state and size of	f household.			13	.  \$	48,239.00
·						
4. How do the lines compare?						
<ul> <li>Line 12b is less than or equal to line 13. On Go to Part 3.</li> <li>Line 12b is more than line 13. On the top of</li> </ul>						22A-2.
Go to Part 3 and fill out Form 22A-2.	,	,				٠
rt 3: Sign Below  By signing here declare ander penalty of perjury	that the information on this	s statement a	nd in any at	tachments is	true and	correct.
Alexis M. Cox Signature of Debtor 1			·			
Date April 29, 2015						
MM / DD / YYYY  If you checked line 14a, do NOT fill out or file Form	22A-2.					
If you checked line 14b, fill out Form 22A-2 and file						

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B 1D (Official Form 1, Exhibit D) (12/09)

## United States Bankruptcy Court Northern District of Illinois

In re	Alexis M. Cox		Case No.	
		Debtor(s)	Chapter	7

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

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B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2				
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);					
unable, after reasonable effort, to participate	109(h)(4) as physically impaired to the extent of being in a credit counseling briefing in person, by telephone, or				
through the Internet.);  ☐ Active military duty in a military c	rombat zone				
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.					
I certify under penalty of perjury that the	information provided above is true and correct.				
Signature of Debtor: /s/ Alexis M. Cox					
	Alexis M. Cox				
Date: April 29, 2015					

В

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B6 Summary (Official Form 6 - Summary) (12/14)

# **United States Bankruptcy Court Northern District of Illinois**

In re	Alexis M. Cox	Case No.		
•		Debtor ,		
			Chapter	7

## **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	3,475.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	9		58,988.50	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			1,932.02
J - Current Expenditures of Individual Debtor(s)	Yes	2			1,860.00
Total Number of Sheets of ALL Schedu	ıles	22			
	T	otal Assets	3,475.00		
			Total Liabilities	58,988.50	

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B 6 Summary (Official Form 6 - Summary) (12/14)

## United States Bankruptcy Court Northern District of Illinois

In re	Alexis M. Cox		Case No.	
		Debtor		
			Chapter_	7
			•	

## STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159. Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	30,933.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	30,933.00

### State the following:

Average Income (from Schedule I, Line 12)	1,932.02
Average Expenses (from Schedule J, Line 22)	1,860.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	2,622.61

### State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY"     column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		58,988.50
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		58,988.50

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B6A (Official Form 6A) (12/07)

In re	Alexis M. Cox	Case No	
_			
		Debtor	

### SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Current Value of Debtor's Interest in Property, without Deducting any Secured Claim

None

Sub-Total > **0.00** (Total of this page)

Total > **0.00** 

(Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

In re	Alexis M. Cox	Case No
-		Debtor

### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	X			
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Checking Account with Alpine Bank, Belvidere, IL. Debtor is joint on account with mother.	-	150.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, including audio, video, and computer equipment.	X			
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.		Books, CD's, DVD's	-	75.00
6.	Wearing apparel.		Used Clothing	-	100.00
7.	Furs and jewelry.		Costume jewelry	-	150.00
8.	Firearms and sports, photographic, and other hobby equipment.	X			
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10.	Annuities. Itemize and name each issuer.	X			
			(Total	Sub-Tota of this page)	al > 475.00

**2** continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Alexis M. Cox	Case No.
-		Debtor

## SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

			(Communion Silver)		
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	4	01K through Current Employer	-	3,000.00
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
				Sub-Tota	al > 3,000.00
			(To	tal of this page)	

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re Alexis M. Cox Case No	In re		Case No
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Debtor

## **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	X			
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

| Sub-Total > | 0.00 | | (Total of this page) | Total > | 3,475.00 |

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

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B6C (Official Form 6C) (4/13)

In re	Alexis M. Cox		Case No.	
•		Debtor	,	

## SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:	☐ Check if debtor claims a homestead exemption that exceeds
(Check one box)	\$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafte
☐ 11 U.S.C. §522(b)(2)	with respect to cases commenced on or after the date of adjustment.)
11 U.S.C. §522(b)(3)	

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Checking, Savings, or Other Financial Accounts, C Checking Account with Alpine Bank, Belvidere, IL. Debtor is joint on account with mother.	Certificates of Deposit 735 ILCS 5/12-1001(b)	150.00	150.00
Books, Pictures and Other Art Objects; Collectible Books, CD's, DVD's	<u>s</u> 735 ILCS 5/12-1001(a)	75.00	75.00
Wearing Apparel Used Clothing	735 ILCS 5/12-1001(a)	100.00	100.00
Furs and Jewelry Costume jewelry	735 ILCS 5/12-1001(a)	150.00	150.00
Interests in IRA, ERISA, Keogh, or Other Pension of 401K through Current Employer	or Profit Sharing Plans 735 ILCS 5/12-1006	100%	3,000.00

Total: 3,475.00 3,475.00

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B6D (Official Form 6D) (12/07)

In re	Alexis M. Cox	Case No	
_		, Debtor	

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured

guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

			•					
CREDITOR'S NAME AND MAILING ADDRESS	0001	Н	sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED,	COZ	U N L	D I S	AMOUNT OF CLAIM WITHOUT	UNSECURED
INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBFOR	C J M	NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	COXF_XGEXF	IQUIDA	D I S P U T E D	DEDUCTING VALUE OF COLLATERAL	PORTION, IF ANY
Account No.				Т	E			
					D	Н		
			Value \$					
Account No.								
			Value \$			Ш		
Account No.								
			Value \$			Ш		
Account No.								
			Value \$	Щ		Ц		
<b>0</b> continuation sheets attached				ubto				
			(Total of th	-	_	ŀ		
			(Report on Summary of Sci		ota	- 1	0.00	0.00
			(Report on Summary of Sc.	nea	uie	5)		

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B6E (Official Form 6E) (4/13)

•				
In re	Alexis M. Cox		Case No.	
-		Debtor		

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) ☐ Domestic support obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). ☐ Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). ☐ Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). ☐ Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). ☐ Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$6,150\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). ☐ Deposits by individuals Claims of individuals up to \$2,775\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). ☐ Taxes and certain other debts owed to governmental units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). ☐ Commitments to maintain the capital of an insured depository institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). ☐ Claims for death or personal injury while debtor was intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

continuation sheets attached

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6F (Official Form 6F) (12/07)

In re	Alexis M. Cox	Case No.
		Debtor

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. \$112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of

Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	UNLIQUIDAT	SPUTE	AMOUNT OF CLAIM
Account No.			Payday Loan	Ť	T E D		
AAA Community Finance Attn: Bankruptcy Dept. PO Box 190 Bethalto, IL 62010		-			D		1,267.50
Account No.			Debt Owed				
All Credit Lenders 4875 E State St. Rockford, IL 61108		-					500.00
Account No.			Utilities				
AT&T Attn: Bankruptcy Dept. PO Box 5014 Carol Stream, IL 60197		-					
							877.00
Account No.  Enhanced Recovery Company Attn: Bankruptcy Dept. PO Box 57547 Jacksonville, FL 32241			Representing: AT&T				Notice Only
_8 continuation sheets attached			(Total of t	Sub his			2,644.50

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B6F (Official Form 6F) (12/07) - Cont.

In re	Alexis M. Cox		Case No.	
_		Debtor		

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER	C O D E B T		sband, Wife, Joint, or Community		l N	ייו	
(See instructions above.)	B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	NT I NG E N	H>D-CD-LZC	U T F	AMOUNT OF CLAIM
Account No.			Debt Owed	Т	T E D		
Cash Store Attn: Bankruptcy Dept. 4221 E State St. Rockford, IL 61108		-			ט		500.00
Account No.			Debt Owed	-			
Check 'n Go Attn: Bankruptcy Dept. 160 N Mulford Rd. Rockford, IL 61108		-					500.00
Account No.	╁		5/2013				
CNAC Attn: Bankruptcy Dept. 5695 E State St. Rockford, IL 61108		-	Auto Deficiency				7,379.00
Account No.			Utilities				
Comcast Attn: Bankruptcy Dept. PO Box 3005 Southeastern, PA 19398		-					450.00
Account No.	╁			+			1555
Enhanced Recovery Company Attn: Bankruptcy Dept. PO Box 57547 Jacksonville, FL 32241			Representing: Comcast				Notice Only
Sheet no. <u>1</u> of <u>8</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Subt			8,829.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Alexis M. Cox	Case No.
		Debtor

CDEDITORIS NAME	С	Hu	sband, Wife, Joint, or Community	С	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	L N H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	QU I DA	1	AMOUNT OF CLAIM
Account No.			Utilities	Т	E		
Commonwealth Edison 3 Lincoln Center Attn: Bankruptcy Group/Claims Dept. Villa Park, IL 60181		-			D		607.00
Account No.	╁					$\dagger$	
IC System 444 Highway 96 East PO Box 64378 Saint Paul, MN 55164-0378			Representing: Commonwealth Edison				Notice Only
Account No.	╁		Utilities			$^{+}$	
DirecTV Attn: Bankruptcy Dept. PO Box 3550 Englewood, CO 80155-6550		-					950.00
Account No.					+		
Afni Attn: Bankruptcy Dept. PO Box 3097 Bloomington, IL 61702-3097			Representing: DirecTV				Notice Only
Account No.	$\dagger$		Notice Only		+		
Equifax PO Box 740256 Atlanta, GA 30374		_					0.00
Shoot no. 2 of 9 shoots attached to Sale-Juli-ef				C1.	tet		3.00
Sheet no. <b>2</b> of <b>8</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total o	Sub f this			1,557.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Alexis M. Cox		Case No.
_		Debtor ,	

CDED/TODIS VIA S	С	Hu	sband, Wife, Joint, or Community	С	Ιυ	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	O N T I N G E N	N L I	T E	AMOUNT OF CLAIM
Account No.			Notice Only	T	E		
Experian PO Box 4500 Allen, TX 75013		_			D		0.00
Account No.	$\vdash$		Tolls				0.00
Illinois Tollway Attn: Bankruptcy Dept. 2700 Ogden Ave Downers Grove, IL 60515		_					
							1,001.00
Account No.							
Arnold Scott Harris Attn: Bankruptcy Dept 111 West Jackson Blvd. Suite 400 Chicago, IL 60604			Representing: Illinois Tollway				Notice Only
Account No.	-		Medical Bills				
Indiana University Health PO Box 7010 Indianapolis, IN 46207		-					
Account No.					_		569.00
Harris & Harris Attn: Bankruptcy Dept. 111 W Jackson B 400 Chicago, IL 60604	_		Representing: Indiana University Health				Notice Only
Sheet no. <u>3</u> of <u>8</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total	Sub of this			1,570.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Alexis M. Cox	Case No.	
_		Debtor	

CREDITOR'S NAME,	CO	Hu	sband, Wife, Joint, or Community		U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	DEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	SPUTED	AMOUNT OF CLAIM
Account No.			Medical Bills	T	E		
Indiana University Radiology 2403 Loy Drive Lafayette, IN 47909		-			D		112.00
Account No.	T			T	T		
Harris & Harris Attn: Bankruptcy Dept. 111 W Jackson B 400 Chicago, IL 60604			Representing: Indiana University Radiology				Notice Only
Account No.			Debt Owed	Т			
Methodist 1701 N Sencite Ave Indianapolis, IN 46202		-					1,000.00
Account No.			Medical Bills	Т	Г		
Mutual Management Services Co., LLC 7177 Crimson Ridge Dr., Suite 10 PO Box 8740 Rockford, IL 61126-6235		-					158.00
Account No.			Utility Services	T	Г		
Nicor Gas Attn: Bankruptcy Dept. PO Box 5407 Carol Stream, IL 60197		-					500.00
Sheet no. 4 of 8 sheets attached to Schedule of				Subt	tota	1	4 770 00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	1,770.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Alexis M. Cox	Case No	
_		Debtor	

	Ic	ш	isband, Wife, Joint, or Community	T_	11	Ь	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J	DATE OF AIM WAS INCURRED AND	COZH_ZGWZ	H>D-CD-LZC	DISPUTED	AMOUNT OF CLAIM
Account No.			Medical Bills	Т	T E D		
OSF St. Anthony Med Center Attn: Bankruptcy Dept. 5510 East State St. Rockford, IL 61108-2381		-			ט		2,490.00
Account No.	╁			+			
Convergent Healthcare Inc. Attn: Bankruptcy Dept. 121 NE Jefferson St. Suite 100 Peoria, IL 61602			Representing: OSF St. Anthony Med Center				Notice Only
Account No.	╁			+			
Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108			Representing: OSF St. Anthony Med Center				Notice Only
Account No.	╁		Debt Owed	+			
Otolarynhology Associates 11725 N Illinois St. #445 Carmel, IN 46032		-					1,000.00
Account No.	$\dagger$		Medical Bills	+			<u> </u>
Rockford Anesthesiologists PO Box 4569 Rockford, IL 61110		-					130.00
Sheet no. 5 of 8 sheets attached to Schedule of				Subt	ota	 l	2 620 00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	e)	3,620.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Alexis M. Cox		Case No.	
_		Debtor		

CDEDITOD'S NAME	С	Hu	sband, Wife, Joint, or Community	С	: 1	ا اِ	)	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	E		J   I	3	AMOUNT OF CLAIM
Account No.				Т			Γ	
Creditors Protection Service Attn: Bankruptcy Dept. PO Box 4115 Rockford, IL 61101			Representing: Rockford Anesthesiologists					Notice Only
Account No.			Debt Owed	+				
Rockford Memorial Hospital 2400 North Rockton Avenue Rockford, IL 61103		-						
								500.00
Account No.  Rockford University 5050 East State Street Rockford, IL 61108		_	Debt Owed					3,000.00
Account No.			Payday Loan	+	t	$\dagger$	1	
Security Finance Corporation Attn: Bankruptcy Dept. PO Box 3146 Spartanburg, SC 29304		-						425.00
Account No.			Debt Owed	+	$\dagger$	+	$\dagger$	
Swedish American Health System Attn: Bankruptcy Dept. 1401 East State Street Rockford, IL 61104		-						500.00
Sheet no. <u>6</u> of <u>8</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	-		(Total	Sub of this			,	4,425.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Alexis M. Cox	Case No.
		Debtor

	1.0	L	about Miles Islant on Osmania	T_	1	<u> </u>	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No.			Utilities	Т	E		
T-Mobile Bankruptcy Team PO Box 53410 Bellevue, WA 98015-3410		-			D		399.00
Account No.	┢			+			333.33
Enhanced Recovery Company Attn: Bankruptcy Dept. PO Box 57547 Jacksonville, FL 32241			Representing: T-Mobile Bankruptcy Team				Notice Only
Account No.	t		Notice Only	+			
TransUnion 555 West Adams Street Chicago, IL 60661		-					0.00
Account No.	╁		Student Loans	+			
US Dept. of Education/GLELSI PO Box 7859 Madison, WI 53704		-					30,933.00
Account No.	$\vdash$		Utilities	+			30,333.00
Verizon Wireless Attn: Bankruptcy Dept. PO Box 26055 Minneapolis, MN 55426		_					1,941.00
Sheet no. <b>7</b> of <b>8</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	-		(Total of t	Subt			33,273.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Alexis M. Cox	Case No.
-		Debtor ,

	1	1		<del></del>	1	_	
CREDITOR'S NAME,	0		sband, Wife, Joint, or Community	- 6	N	ı	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C H H	IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT		DISPUTED	AMOUNT OF CLAIM
Account No.			Payday Loan	Ι΄	Ė		
World Finance Corporation Attn: Bankruptcy Dept. 2570 Charles St. Rockford, IL 61108		-					1,300.00
Account No.							
Account No.				T			
Account No.							
Account No.							
Sheet no. <b>8</b> of <b>8</b> sheets attached to Schedule of			;	Sub	tota	ıl	4 200 00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	1,300.00
			(Report on Summary of So		Γota dule		58,988.50

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B6G (Official Form 6G) (12/07)

In re	Alexis M. Cox	Case No	
_			
		Debtor	

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 15-81196 Doc 1 Filed 04/29/15 Entered 04/29/15 17:05:42 Desc Main Document Page 36 of 60

B6H (Official Form 6H) (12/07)

In re	Alexis M. Cox	Case No.
		· · · · · · · · · · · · · · · · · · ·
		Debtor

### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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Fill	in this information to identify your	2250.				Ī				
	otor 1 Alexis M. C									
	otor 2 use, if filing)									
Uni	ted States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS							
	se number nown)		-			□ A		ed filing ent showin	ng post-petition ollowing date:	n chapter
<u>O</u> 1	fficial Form B 6I					N	/IM / DD/ Y	/YYY		
S	chedule I: Your Inc	ome								12/13
spo atta	plying correct information. If you use. If you are separated and yo ch a separate sheet to this form.  Describe Employment  Fill in your employment	ur spouse is not filing w On the top of any additi	ith you, do not incl	ude infor	mati	on abou	t your spo	ouse. If m	ore space is I	needed,
1.	information.		Debtor 1				Debtor 2	2 or non-f	iling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>				☐ Emple	oyed mployed		
	employers.	Occupation	Claims Examir	ner						
	Include part-time, seasonal, or self-employed work.	Employer's name	First Source							
	Occupation may include student or homemaker, if it applies.	Employer's address	7141 Harrison Rockford, IL 6							
		How long employed t	here? 2 year	s 3 mon	ths		_			
Par	Give Details About Mo	nthly Income								
	mate monthly income as of the cuse unless you are separated.	date you file this form. If	you have nothing to	report for	any	line, write	e \$0 in the	space. In	clude your nor	n-filing
If yo more	u or your non-filing spouse have me e space, attach a separate sheet to	nore than one employer, control this form.	ombine the informati	on for all	empl	oyers for	that perso	on on the li	ines below. If y	ou need
						For Del	btor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sale deductions). If not paid monthly,			2.	\$	2	2,402.08	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ine 2 + line 3.		4.	\$	2,4	02.08	\$	N/A	

Deb	tor 1	Alexis M. Cox	_	Case n	number (if known)			
	Сор	y line 4 here	4.	For I	Debtor 1 2,402.08	For Debtor		
5.	List	all payroll deductions:						
0.	5a. 5b. 5c. 5d. 5e. 5f. 5g.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues	5a. 5b. 5c. 5d. 5e. 5f. 5g.	\$ \$ \$ \$ \$ \$ \$ \$ \$	261.73 0.00 0.00 0.00 208.33 0.00 0.00	\$ \$ \$ \$ \$	N/A N/A N/A N/A N/A N/A	
	5h.	Other deductions. Specify:	5h.+	\$	0.00	+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	470.06	\$	N/A	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,932.02	\$	N/A	
8.	8b. 8c. 8d. 8e. 8f. 8g. 8h.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income  Other monthly income. Specify:	8c. 8d. 8e.	\$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$	N/A N/A N/A N/A N/A N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	1	,932.02 + \$_	N/A	= \$	1,932.02
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not a cify:	depend					0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies					\$Combine	1,932.02 ed
13.	Do y ■ □	No. Yes. Explain:	?				monthly	income

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Fill	in this informa	tion to identify yo	our case:					
Deb	otor 1	Alexis M. Co	X			Che	eck if this is:	
			<u></u>		_		An amended filing	
	otor 2 ouse, if filing)						A supplement show 13 expenses as of	wing post-petition chapter the following date:
Linit	ad States Bankı	untey Court for the	· NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
		upicy Court for the	. <u>NORTI</u>	ILINI DISTRICT OF ILLIN	013			
	e number nown)						A separate filing fo 2 maintains a sepa	r Debtor 2 because Debtor rate household
Of	fficial Fo	rm B 6J						
S	chedule	J: Your	Exper	ises				12/1:
info	ormation. If m		eded, atta	. If two married people ar ch another sheet to this in.				
Par	t 1: Descr	ibe Your House	hold					
1.	Is this a joir							
	■ No. Go to		in a separ	ate household?				
	ПΥ	es. Debtor 2 mus	st file a sep	parate Schedule J.				
2.	Do you have	e dependents?	■ No					
	Do not list D	ebtor 1 and	☐ Yes.	Fill out this information for	Dependent's relati		Dependent's	Does dependent
	Debtor 2.  Do not state	the		each dependent	Deptor 1 or Deptor	7 2	age	live with you?
	dependents'							☐ Yes
								□ No
								☐ Yes ☐ No
								☐ No ☐ Yes
							_	□ No
							_	☐ Yes
3.		penses include f people other t	han	No				
		d your depende		Yes				
Par	t 2: Estim	ate Your Ongoi	na Month!	v Expenses				
Est	imate your ex	cpenses as of yo	our bankrı	uptcy filing date unless y y is filed. If this is a supp				
	•	•		government assistance i	•			
	value of suci ficial Form 6I		d have inc	cluded it on Schedule I: Y	our Income		Your exp	enses
4.		or home owners		ses for your residence. In	nclude first mortgage	e 4.	\$	505.00
		led in line 4:	•				-	
		estate taxes				4a.	\$	0.00
		rty, homeowner's	s, or renter	's insurance		4a. 4b.		0.00
	•	•		ıpkeep expenses		4c.	\$	0.00
		owner's associat				4d.	\$	0.00
5.	Additional r	nortgage payme	ents for vo	our residence, such as ho	me equity loans	5.	\$	0.00

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Dilities:   Dia   Electricity, heat, natural gas   Electricity,	50.00 40.00 125.00 0.00 375.00 0.00 150.00 115.00 50.00 50.00
Electricity, heat, natural gas  Water, sewer, garbage collection  Can. Telephone, cell phone, Internet, satellite, and cable services  Can. Telephone, cell phone, Internet, satellite, and cable services  Can. Telephone, cell phone, Internet, satellite, and cable services  Can. Telephone, cell phone, Internet, satellite, and cable services  Can. Telephone, cell phone, Internet, satellite, and cable services  Can. Telephone, cell phone, Internet, satellite, and cable services  Can. Telephone, cell phone, Internet, satellite, and cable services  Can. Telephone, cell phone, Internet, satellite, and cable services  Can. Telephone, cell phone, Internet, satellite, and cable services  Can. Telephone, cell phone, Internet, satellite, and cable services  Can. Telephone, cell phone, Internet, satellite, and cable services  Can. Telephone, cell phone, Internet, satellite, and cable services  Can. Telephone, cell phone, Internet, satellite, and cable services  Can. Telephone, cell phone, Internet, satellite, and cable services  Can. Telephone, cell phone, Internet, satellite, and cable services  Can. Telephone, cell phone, Internet, satellite, and cable services  Can. Telephone, cell phone, Internet, satellite, and cable services  Can. Telephone, cell phone, Internet, satellite, and cable services  Can. Telephone, cell phone, Internet, satellite, and cable services  Can. Telephone, cell phone, Internet, satellite, and cable services  Can. Telephone, cell phone, Internet, satellite, and cable services  Can. Telephone, cell phone, Internet, satellite, and cable services  Can. Telephone, cell phone, Internet, satellite, and cable services  Can. Telephone, cell phone, latellite, and cable services  Can. Telephone, cell phone, cell phone, cell phone, cell phone, cell phone, cell phone, cell phone  Can. Telephone, cell phone, cell phone, cell phone, cell	40.00 125.00 0.00 375.00 0.00 150.00 115.00 50.00 50.00 0.00
Sb. Water, sewer, garbage collection  Co. Telephone, cell phone, Internet, satellite, and cable services  Co. Telephone, cell phone, Internet, satellite, and cable services  Co. Std. Other. Specify:  Cood and housekeeping supplies  Childcare and children's education costs  Childcare and dry cleaning  Personal care products and services  Medical and dental expenses  In specifical and dental expenses  In sp	40.00 125.00 0.00 375.00 0.00 150.00 115.00 50.00 50.00 0.00
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Signature Section Specify:  Signature Specify:  Signat	0.00 375.00 0.00 150.00 115.00 50.00 325.00 50.00
Childcare and children's education costs Childcare and dry, and dry cleaning Dersonal care products and services Childcare and dental expenses Charladde car payments Charladde car payments. Cho not include car payments. Charladde car payments. Charladde car payments Charladde car payments and religious donations Charladde contributions and religious donations Charladde insurance Cho not include insurance deducted from your pay or included in lines 4 or 20. Charladde insurance Cho not include taxes deducted from your pay or included in lines 4 or 20. Cho insurance Cho not include taxes deducted from your pay or included in lines 4 or 20. Cho insurance Cho not include taxes deducted from your pay or included in lines 4 or 20. Cho insurance Cho not include taxes deducted from your pay or included in lines 4 or 20. Cho insurance Cho not include taxes deducted from your pay or included in lines 4 or 20. Cho insurance Cho not include taxes deducted from your pay or included in lines 4 or 20. Cho insurance Cho not include taxes deducted from your pay or included in lines 4 or 20. Cho insurance Cho not include taxes deducted from your pay or included in lines 4 or 20. Cho insurance Cho not include taxes deducted from your pay or included in lines 4 or 20. Cho insurance Cho not include taxes deducted from your pay or included in lines 4 or 20. Cho insurance Cho not include taxes deducted from your pay or included in lines 4 or 20. Cho not include taxes deducted from your p	375.00 0.00 150.00 115.00 50.00 325.00 50.00
Childcare and children's education costs  Clothing, laundry, and dry cleaning Personal care products and services  Medical and dental expenses Inansportation. Include gas, maintenance, bus or train fare. Do not include car payments. Intertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. Isa. Life insurance Isa. Life insurance Isa. Vehicle insurance Isa. Vehicle insurance Isa. Other insurance. Specify: Isaxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Isa. Car payments for Vehicle 1 Isa. Car payments for Vehicle 1 Isa. Car payments for Vehicle 2 Isa. Car payments for Vehicle 2 Isa. Car payments of alimony, maintenance, and support that you did not report as deducted from your pay on tine with you.  Specify: Isa. Specify:	0.00 150.00 115.00 50.00 325.00 50.00 0.00
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Personal care products and services  Medical and dental expenses  Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.  Entertainment, clubs, recreation, newspapers, magazines, and books  Charitable contributions and religious donations  nsurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15d. Other insurance. Specify:  15d. Other insurance. Specify:  15d. Specify:  15d. Car payments for Vehicle 1  17a. Car payments for Vehicle 2  17b. Car payments for Vehicle 2  17c. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  Specify:  19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income (Difficial Form of Income Include Income	115.00 50.00 325.00 50.00 0.00
Medical and dental expenses  Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.  Entertainment, clubs, recreation, newspapers, magazines, and books  Charitable contributions and religious donations  Id. \$  Charitable contributions and religious donations  Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.  Isa. Life insurance  Isb. Health insurance  Isc. Vehicle insurance  Isc. Vehicle insurance.  Isc. Other insurance. Specify:  Isaxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  Isaxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Ispecify:  Isaxes. Car payments for Vehicle 1  Isaxes. Car payments for Vehicle 1  Isaxes. Car payments for Vehicle 1  Isaxes. Car payments for Vehicle 2  Isaxes. Other. Specify:  Isaxes. Car payments for Vehicle 2  Isaxes. Car payments for Vehicle 1  Isaxes. Car payments for Veh	50.00 325.00 50.00 0.00
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15c. Vehicle insurance 15d. \$  15d. Other insurance. Specify: 15d. \$  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$  Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$  17b. Car payments for Vehicle 2 17b. \$  17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Specif	0.00
Isd. Other insurance. Specify:  Faxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  Installment or lease payments:  If a. Car payments for Vehicle 1  If b. Car payments for Vehicle 2  If c. Other. Specify:  If d. Other. Specify:  If d. Other. Specify:  If d. Other. Specify:  If d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  Specify:  If d. Specify:  If d	0.00
Faxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	0.00
Specify:	0.00
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17b. Car payments for Vehicle 2  17c. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. \$  18. \$  18. \$  18. \$  18. \$  19. Other payments you make to support others who do not live with you.  19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income (Official Form of this form or on Schedule I: Your Income (Official Form of this form or on Schedule I: Your Income (Official Form of this form or on Schedule I: Your Income (Official Form of this form or on Schedule I: Your Income (Official Form of this form or on Schedule I: Your Income (Official Form of this form or on Schedule I: Your Income (Official Form of this form or on Schedule I: Your Income (Official Form of this form o	
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Specify: 19.  Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your In	0.00
Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your In	0.00
	come.
	0.00
20b. Real estate taxes 20b. \$	0.00
20c. Property, homeowner's, or renter's insurance 20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses 20d. \$	0.00
20e. Homeowner's association or condominium dues 20e. \$	0.00
Other: Specify: Miscellaneous, Birthdays, Holidays, Haircuts 21. +\$	75.00
<b>Your monthly expenses.</b> Add lines 4 through 21.	1,860.00
The result is your monthly expenses.	
Calculate your monthly net income.  23a. Copy line 12 (your combined monthly income) from Schedule I.  23a. \$	4 022 02
23b. Copy your monthly expenses from line 22 above. 23b\$	1,932.02
:sb. Copy your monthly expenses from line 22 above.	1,860.00
23c. Subtract your monthly expenses from your monthly income.	
The result is your <i>monthly net income</i> .	72.02
Oo you expect an increase or decrease in your expenses within the year after you file this form	
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payme nodification to the terms of your mortgage?	nt to increase or decrease because
_	
No.	
☐ Yes. Explain:	

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**B6 Declaration (Official Form 6 - Declaration).** (12/07)

# **United States Bankruptcy Court Northern District of Illinois**

In re	Alexis M. Cox			Case No.	
			Debtor(s)	Chapter	7
	DECLARATIO	ON CONCERN	NING DEBTOR	'S SCHEDUL	ES
	DECLARATION UN	DER PENALTY (	OF PERJURY BY II	NDIVIDUAL DE	BTOR
	I declare under penalty of per sheets, and that they are true and corre				
Date	April 29, 2015	Signature	/s/ Alexis M. Cox		
			Debtor		

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

# United States Bankruptcy Court Northern District of Illinois

In re	Alexis M. Cox		Case No.	
		Debtor(s)	Chapter	7

## STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

## 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$11,115.95 2015 YTD: Employment Income \$24,984.00 2014: Employment Income \$27,000.00 2013: Employment Income

## 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

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# 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS
OF CREDITOR
PAYMENTS
AMOUNT
CNAC
Monthly
\$40

AMOUNT PAID OWING **\$405.00 \$7,379.00** 

Attn: Bankruptcy Dept. 5695 E State St. Rockford, IL 61108

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAID OR
PAYMENTS/ VALUE OF AMOUNT STILL
TRANSFERS TRANSFERS OWING

NAME AND ADDRESS OF CREDITOR

c. *All debtors*: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

AMOUNT STILL

# 4. Suits and administrative proceedings, executions, garnishments and attachments

None

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT NATURE OF COURT OR AGENCY STATUS OR AND CASE NUMBER PROCEEDING AND LOCATION DISPOSITION

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE
BENEFIT PROPERTY WAS SEIZED

Security Finance Central
Attn: Bankruptcy Dept.

PO Box 1893

DESCRIPTION AND VALUE OF
DATE OF SEIZURE
1/2015 - 3/2015
Wage Garnishment, \$809.50

Spartanburg, SC 29304

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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NAME AND ADDRESS OF PERSON FOR WHOSE

BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE 3/2015 - 4/2015

DESCRIPTION AND VALUE OF PROPERTY

AAA Community Finance Attn: Bankruptcy Dept. PO Box 190 Bethalto, IL 62010 Wage Garnishment, \$629.81

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER CNAC

CNAC Attn: Bankruptcy Dept. 5695 E State St. Rockford, IL 61108 DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN 4/2015

DESCRIPTION AND VALUE OF PROPERTY 2004 Jeep Liberty, \$3,675.00

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

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## 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Springer Law Firm 2222 E State St, Suite 107 Rockford, IL 61104 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR 4/2015 AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

\$450.00

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S)

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

# 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

IN PROPERTY

DATE OF TRANSFER OR SURRENDER, IF ANY

# 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

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## 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

## 15. Prior address of debtor

None П

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

**ADDRESS** NAME USED DATES OF OCCUPANCY

208 N. 6th Street, Kirkland, IL 60146 8/2012 - 2/2013 Same 1821 8th St. Rockford, IL 61102 8/2009 - 8/2012 Same

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF **ENVIRONMENTAL** SITE NAME AND ADDRESS

GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF **ENVIRONMENTAL** SITE NAME AND ADDRESS

**GOVERNMENTAL UNIT** NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the

docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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### 18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND NATURE OF BUSINESS ENDING DATES

NAME None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

## 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

# NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

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#### 20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

### 21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

#### 22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME ADDRESS

DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

TITLE

DATE OF TERMINATION

#### 23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

### 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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## 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\* \* \* \* \* \*

## DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date April 29, 2015
Signature /s/ Alexis M. Cox
Alexis M. Cox
Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B8 (Form 8) (12/08)

# **United States Bankruptcy Court**Northern District of Illinois

	Northern Dist	rict of Hillions		
In re Alexis M. Cox			Case No.	
	De	btor(s)	Chapter	7
PART A - Debts secured by property		st be fully comp		
Property No. 1	n additional pages if nece	ssary.)		
Creditor's Name: -NONE-	]	Describe Propert	y Securing Deb	:
Property will be (check one): ☐ Surrendered	☐ Retained			
If retaining the property, I intend to (checon Redeem the property  ☐ Reaffirm the debt ☐ Other. Explain	ck at least one): (for example, avoid	l lien using 11 U.S	S.C. § 522(f)).	
Property is (check one): ☐ Claimed as Exempt	ļ	☐ Not claimed as	exempt	
PART B - Personal property subject to un Attach additional pages if necessary.)	nexpired leases. (All three o	olumns of Part B	must be complet	ed for each unexpired lease.
Lessor's Name: -NONE-	Describe Leased Prop	erty:	Lease will b U.S.C. § 365 □ YES	e Assumed pursuant to 11 5(p)(2):
I declare under penalty of perjury that personal property subject to an unexpi		tention as to any	property of my	estate securing a debt and/or
Date <b>April 29, 2015</b>		/ Alexis M. Cox lexis M. Cox		

Debtor

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# **United States Bankruptcy Court** Northern District of Illinois

In re	Alexis M. Co	(				Case N	lo.	
					Debtor(s)	Chapte	er <b>7</b>	
	DIS	SCL	OSURE OF	COMPENSA	TION OF AT	FORNEY FOR	DEBTOR	R(S)
p	aid to me within or	ne year	r before the filing	g of the petition in b		d to be paid to me, for		otor and that compensation ered or to be rendered on
	For legal service	es, I h	nave agreed to acc	cept		\$	45	50.00
							45	50.00
	Balance Due					\$		0.00
2. T	The source of the co	mpen	sation paid to me	was:				
	Debtor		Other (specify):	:				
3. T	The source of comp	ensatio	on to be paid to m	ne is:				
	Debtor		Other (specify):	:				
4. <b>I</b>	I have not agree	d to sl	nare the above-dis	sclosed compensati	on with any other pe	erson unless they are n	nembers and a	associates of my law firm.
[						ons who are not members on the compensation is		ates of my law firm. A
5. I	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:							
b c	<ul><li>Preparation and</li><li>Representation of</li><li>[Other provision</li></ul>	filing of the cases as ne	of any petition, so debtor at the meet eeded]	chedules, statement ting of creditors and	of affairs and plan v d confirmation hearing	n determining whethe which may be required ng, and any adjourned ; exemption planni	; hearings ther	reof;
	reaffirma	tion a	igreements and	d applications as liens on househ	s needed; prepara	ation and filing of n	notions pur	suant to 11 USC
6. B	Represer	ntatio	otor(s), the above- n of the debtors ersary proceed	s in any dischar	not include the follogeability actions,	owing service: judicial lien avoida	ances, relief	f from stay actions or
				CE	RTIFICATION			
	certify that the for ankruptcy proceedi		is a complete sta	atement of any agre-	ement or arrangemen	nt for payment to me f	or representa	tion of the debtor(s) in
Dated	: April 29, 201	5			/s/ Daniel A.	Springer		
					Daniel A. Spi	ringer		
					Springer Law 2222 E State			
					Suite 107			
					Rockford, IL 815.312.4725			
						@gmail.com		

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Springer Law Firm

2222 East State St. # A-104A, Rockford, IL

815.312.4275

# **CHAPTER 7 RETAINER AGREEMENT**

The undersigned agrees to hire Springer Law Firm to represent the undersigned in a Chapter 7 bankruptcy and agrees to the following terms and conditions:

- The attorney fees for the Chapter 7 bankruptcy are \$450. This is a flat fee arrangement, and does not
  include the court costs, which are currently \$335. This is the total of your attorney fees, and Springer Law
  Firm will not charge you for additional work. However, if you refuse to cooperate, or fail to provide
  information as requested by our attorney, your case may be closed.
- 2. Fees paid to the firm become property of the firm upon payment. If before the case is filed, you decide to close out your case, Springer Law Firm will refund you any fees not earned. I assign to Springer Law Firm any amount paid towards court costs and filing fees. I authorize Springer Law Firm to transfer said funds to the firm's operating account if I decide not to file for bankruptcy, or if I breach this contract.
- 3. I agree to disclose all pertinent information to Springer Law Firm, so that the firm can properly disclose all my assets, debts, and financial history to the court. I agree to keep the firm informed on any new assets or debts I may incur from this date forward. If I do not provide the proper information, or do not cooperate with Springer Law Firm, said firm may withdraw from representation, with permission of the court.
- 4. I understand that I may not be able to protect all of my property. The bankruptcy code does not provide exemptions for everything, and as such, some of my property may be taken by the Trustee and sold. Additionally, if my income is too high, or if my income is not offset enough by my expenses, I understand that the Trustee may dismiss my case, or require me to file a Chapter 13 instead of a Chapter 7.
- 5. I understand that not all of my debts may be discharged in a Chapter 7 bankruptcy. Student loans, educational debts, undisclosed debt, support/maintenance, fines, debts incurred by fraud, future association/condo HOA dues, certain tax debts, or debts found non-dischargeable by a Judge are among the debts not dischargeable.
- 6. I understand that this retainer agreement is for bankruptcy representation only. Springer Law Firm will not represent me in any other case or legal matter, unless agreed to in a separate retainer agreement. This includes adversary proceedings that may fall under the bankruptcy case. This agreement does not include representation in such adversary proceedings.
- 7. I understand that before I transfer or sell any property, or incur any new debt, I will first notify Springer Law Firm and consult on the impact such action will have on my bankruptcy.
- 8. I understand that I must take 2 classes pertaining to financial management and credit counselling. Failure to take these courses will result in either my case NOT being filed, or if filed, possibly dismissed. If my case is dismissed, I understand that I will have to pay to have my case re-opened by Springer Law Firm.
- 9. I have received the 11 U.S.C. § 527(a) disclosures and have read them.

Dotod:

Signature:

Print Name:

Attorney Signature:

Attorney Print:

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

# 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

# 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

# Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the

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Form B 201A, Notice to Consumer Debtor(s)

Page 2

Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

## Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

## Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

# 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

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B 201B (Form 201B) (12/09)

# **United States Bankruptcy Court**

	Norther	rn District of Illinois		
In re	Alexis M. Cox		Case No.	
		Debtor(s)	Chapter 7	
	CERTIFICATION OF NO UNDER § 342(b) OI		`	()
Code.	Certif I (We), the debtor(s), affirm that I (we) have received	fication of Debtor ed and read the attached r	notice, as required by	§ 342(b) of the Bankruptcy
Alexis	s M. Cox	$\chi$ /s/ Alexis M. (	Cox	April 29, 2015
Printe	d Name(s) of Debtor(s)	Signature of D	Debtor	Date
Case 1	No. (if known)	X		
		Signature of Jo	oint Debtor (if any)	Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

# **United States Bankruptcy Court**Northern District of Illinois

		Not then District of Infinois		
In re	Alexis M. Cox		Case No.	
		Debtor(s)	Chapter	7
	VI	ERIFICATION OF CREDITOR N	MATRIX	
		Number o	f Creditors:	37
	The above-named Debtor(s (our) knowledge.	) hereby verifies that the list of cred	itors is true and	correct to the best of my
	April 29, 2015	/s/ Alexis M. Cox		

AAA Community Finance Attn: Bankruptcy Dept. PO Box 190 Bethalto, IL 62010

Afni Attn: Bankruptcy Dept. PO Box 3097 Bloomington, IL 61702-3097

All Credit Lenders 4875 E State St. Rockford, IL 61108

Arnold Scott Harris Attn: Bankruptcy Dept 111 West Jackson Blvd. Suite 400 Chicago, IL 60604

AT&T Attn: Bankruptcy Dept. PO Box 5014 Carol Stream, IL 60197

Cash Store Attn: Bankruptcy Dept. 4221 E State St. Rockford, IL 61108

Check 'n Go Attn: Bankruptcy Dept. 160 N Mulford Rd. Rockford, IL 61108

CNAC Attn: Bankruptcy Dept. 5695 E State St. Rockford, IL 61108

Comcast
Attn: Bankruptcy Dept.
PO Box 3005
Southeastern, PA 19398

Commonwealth Edison 3 Lincoln Center Attn: Bankruptcy Group/Claims Dept. Villa Park, IL 60181

Convergent Healthcare Inc. Attn: Bankruptcy Dept. 121 NE Jefferson St. Suite 100 Peoria, IL 61602

Creditors Protection Service Attn: Bankruptcy Dept. PO Box 4115 Rockford, IL 61101

DirecTV Attn: Bankruptcy Dept. PO Box 3550 Englewood, CO 80155-6550

Enhanced Recovery Company Attn: Bankruptcy Dept. PO Box 57547 Jacksonville, FL 32241

Equifax PO Box 740256 Atlanta, GA 30374

Experian PO Box 4500 Allen, TX 75013

Harris & Harris Attn: Bankruptcy Dept. 111 W Jackson B 400 Chicago, IL 60604

IC System
444 Highway 96 East
PO Box 64378
Saint Paul, MN 55164-0378

Illinois Tollway Attn: Bankruptcy Dept. 2700 Ogden Ave Downers Grove, IL 60515

Indiana University Health PO Box 7010 Indianapolis, IN 46207

Indiana University Radiology 2403 Loy Drive Lafayette, IN 47909

Methodist 1701 N Sencite Ave Indianapolis, IN 46202

Mutual Management Services Co., LLC 7177 Crimson Ridge Dr., Suite 10 PO Box 8740 Rockford, IL 61126-6235

Nicor Gas Attn: Bankruptcy Dept. PO Box 5407 Carol Stream, IL 60197

OSF St. Anthony Med Center Attn: Bankruptcy Dept. 5510 East State St. Rockford, IL 61108-2381

Otolarynhology Associates 11725 N Illinois St. #445 Carmel, IN 46032

Rockford Anesthesiologists PO Box 4569 Rockford, IL 61110

Rockford Memorial Hospital 2400 North Rockton Avenue Rockford, IL 61103 Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108

Rockford University 5050 East State Street Rockford, IL 61108

Security Finance Corporation Attn: Bankruptcy Dept. PO Box 3146 Spartanburg, SC 29304

Swedish American Health System Attn: Bankruptcy Dept. 1401 East State Street Rockford, IL 61104

T-Mobile Bankruptcy Team PO Box 53410 Bellevue, WA 98015-3410

TransUnion 555 West Adams Street Chicago, IL 60661

US Dept. of Education/GLELSI PO Box 7859 Madison, WI 53704

Verizon Wireless Attn: Bankruptcy Dept. PO Box 26055 Minneapolis, MN 55426

World Finance Corporation Attn: Bankruptcy Dept. 2570 Charles St. Rockford, IL 61108